



Docket: 14484

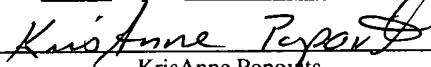
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | |
|-----------------------|--------------------|------------------------|
| First Named Inventor: | Michael R. Klardie | |
| Application No.: | 10/099,930 | |
| Filing Date: | March 13, 2002 | Examiner: M. Bumgarner |
| Title: | IMPRESSION CAP | Group Art Unit: 3732 |

TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

I hereby certify that this document is being sent via First Class U.S. mail addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 1 day of June, 2004.


KrisAnne Popovits

Dear Sir:

The following documents are enclosed in connection with the above-referenced patent application:

1. Amendment And Response (25 pages);
2. Petition For Extension Of Period For Response (1 page);
3. Fee Determination (After Amendment of Claims) (1 page, submitted in duplicate); and
4. Return Receipt Postcard.

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TECHNOLOGY CENTER R3700

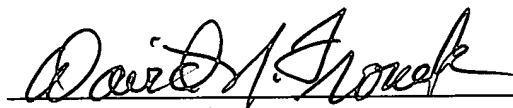
Respectfully submitted,

DORSEY & WHITNEY LLP
Customer Number 25763

Date:

June 1, 2004

By:



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Reg. No. 25,678
Intellectual Property Department
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A circular ink stamp from the Patent & Trademark Office. The text "PATENT & TRADEMARK OFFICE" is curved along the bottom inner edge. The date "JUN 03 2004" is stamped in the center. The words "COPY" and "E" are partially visible at the top, and "After" is visible on the right side of the stamp.

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TECHNOLOGY CENTER B3700

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| Group Art Unit | 3732 |
| Examiner Name | M. Bumgarner |
| Atty. Docket Number | 14484 |

Claims as Amended in Response to Office Action dated: 01/29/2004

| METHOD OF PAYMENT (Check One) | | AMENDMENT FEE CALCULATION (Continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|------------------------------------|---|------------------------------------|-------------------|-----------------|----------------|------------------------|----|--|-----------------------------------|--------------|-----------|---|----|-----|---|--|---|---|-----|---|---------------------|-------|-------|--|--------------|---------------------------------|-----|---------------------------|--|-----|-----|------------------|--|-----|-----|-----------------------------------|--|-----|-----|--------------------------|--|-----|----|-------------------------|--|-----|----|----------------------------------|--|-------|-----|------------------------------------|--|-----|-----|-------------------------------|--|-----|-----|-------------------|--|-----|-----|---|--|--|
| 1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No.: <u>04-1420</u> Deposit Account Name: <u>DORSEY & WHITNEY LLP</u> <input checked="" type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27) | | 3. ADDITIONAL FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. <input type="checkbox"/> Check Enclosed | | <table border="1"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>110</td> <td>55</td> <td>Extension for reply within first month</td> <td>\$55</td> </tr> <tr> <td>420</td> <td>210</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>950</td> <td>475</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1,480</td> <td>740</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>2,010</td> <td>1,005</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1,330</td> <td>665</td> <td>Issue Fee-Utility/Reissue</td> <td></td> </tr> <tr> <td>330</td> <td>165</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>330</td> <td>165</td> <td>Filing brief in support of appeal</td> <td></td> </tr> <tr> <td>290</td> <td>145</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Terminal Disclaimer Fee</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Petition to revive – unavoidable</td> <td></td> </tr> <tr> <td>1,330</td> <td>665</td> <td>Petition to revive – unintentional</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of IDS</td> <td></td> </tr> <tr> <td>770</td> <td>385</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> </tbody> </table> | Large Entity Fee | Small Entity Fee | Fee Description | Fee Paid | 110 | 55 | Extension for reply within first month | \$55 | 420 | 210 | Extension for reply within second month | | 950 | 475 | Extension for reply within third month | | 1,480 | 740 | Extension for reply within fourth month | | 2,010 | 1,005 | Extension for reply within fifth month | | 1,330 | 665 | Issue Fee-Utility/Reissue | | 330 | 165 | Notice of Appeal | | 330 | 165 | Filing brief in support of appeal | | 290 | 145 | Request for oral hearing | | 110 | 55 | Terminal Disclaimer Fee | | 110 | 55 | Petition to revive – unavoidable | | 1,330 | 665 | Petition to revive – unintentional | | 130 | 130 | Petitions to the Commissioner | | 180 | 180 | Submission of IDS | | 770 | 385 | Request for Continued Examination (RCE) | | |
| Large Entity Fee | Small Entity Fee | Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110 | 55 | Extension for reply within first month | \$55 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 420 | 210 | Extension for reply within second month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 950 | 475 | Extension for reply within third month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1,480 | 740 | Extension for reply within fourth month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1,330 | 665 | Issue Fee-Utility/Reissue | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 330 | 165 | Notice of Appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 330 | 165 | Filing brief in support of appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 290 | 145 | Request for oral hearing | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110 | 55 | Terminal Disclaimer Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110 | 55 | Petition to revive – unavoidable | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1,330 | 665 | Petition to revive – unintentional | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 130 | 130 | Petitions to the Commissioner | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 180 | 180 | Submission of IDS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 770 | 385 | Request for Continued Examination (RCE) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AMENDMENT FEE CALCULATION | | Other fee (specify): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. EXTRA* CLAIM FEES | | Subtotal (2) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>Claims Remaining after Amendment</th> <th>Highest Number Previously Paid for</th> <th>Present Extra</th> <th>Fee from Below*</th> <th>Additional Fee</th> </tr> </thead> <tbody> <tr> <td>Total 81</td> <td>-</td> <td>69</td> <td>= 0</td> <td>x \$9.00 = 0</td> </tr> <tr> <td>Indep. 15</td> <td>-</td> <td>3</td> <td>= 9</td> <td>x \$43.00 = \$387</td> </tr> <tr> <td colspan="4">First Presentation of Multiple Dependent Claim</td> <td>x =</td> </tr> <tr> <td colspan="4">Subtotal (1)</td> <td>\$387</td> </tr> </tbody> </table> | | Claims Remaining after Amendment | Highest Number Previously Paid for | Present Extra | Fee from Below* | Additional Fee | Total 81 | - | 69 | = 0 | x \$9.00 = 0 | Indep. 15 | - | 3 | = 9 | x \$43.00 = \$387 | First Presentation of Multiple Dependent Claim | | | | x = | Subtotal (1) | | | | \$387 | Total Amount of Payment: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Claims Remaining after Amendment | Highest Number Previously Paid for | Present Extra | Fee from Below* | Additional Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total 81 | - | 69 | = 0 | x \$9.00 = 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Indep. 15 | - | 3 | = 9 | x \$43.00 = \$387 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| First Presentation of Multiple Dependent Claim | | | | x = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subtotal (1) | | | | \$387 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Calculation of Extra Claim Fees | | \$442 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Large Entity Fee | Small Entity Fee | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 | 9 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 86 | 43 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 290 | 145 | Multiple dependent Claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 86 | 43 | Reissue independent claims over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 | 9 | Reissue claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Submitted by:

CUSTOMER NUMBER

25763

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Date: June 1, 2004